FIRST ANNUAL REPORT

of the

WEST WILTS

HOSPITALS MANAGEMENT COMMITTEE

July 1948 to March 1949

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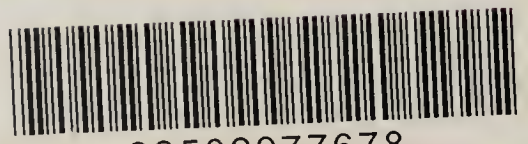
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FIRST ANNUAL REPORT OF THE WEST WILTS HOSPITALS MANAGEMENT COMMITTEE

This report upon the work of the West Wilts Hospitals Management Committee during the nine months which elapsed between the coming into force of the National Health Service Act on the 5th July, 1948, and the end of the financial year on the 31st March, 1949, is primarily intended for the information of the residents in the area for which the Committee are responsible. Prior to the coming into force of the Act, it was upon the residents that the entire responsibility for the hospital treatment of patients in the area fell. The hospitals were administered either by committees responsible to elected local authorities or by voluntary bodies responsible to local public opinion ; local interest manifested itself in many ways, and local pride was taken in the efficiency of the staffs and the comfort of the patients ; above all, the entire financial responsibility for the provision and maintenance of hospital accommodation fell upon the residents in the area, and took the form of voluntary contributions, moneys raised by local effort, and rates levied by elected representative bodies. The property for the administration of which the Committee are now responsible, and, still more important, the tradition and good-will built up through years of devoted service to the sick and aged, are legacies for which they must always be grateful, and for the perpetuation of which they must accept full responsibility.

This is not to say that no improvement was possible. It had for a long time been accepted on all sides that with advancing standards for both patients and staff it was desirable that these voluntary activities should by co-ordinated by the State, and, in general, that local finance should be supplemented from Government sources. The scheme which was ultimately adopted provided for the entire responsibility for finance to be borne by the State, and it has been ruled that until the financial aspect has been laid before Parliament and debated on a national basis, it would be improper for figures to be given in local reports. The Committee have perforce accepted this ruling, but they regret its necessity and recognise that it must result in many legitimate local questions being left temporarily unanswered. They feel strongly that if this limitation is to be permanent, there is grave risk that local interest will be diminished to an ever-increasing extent. This would be calamity. The health of the community is a matter in which local pride and interest have still a great part to play. The Committee earnestly trust that some means may be found in the near future to remove what they regard as a serious disability. Meanwhile, this report must deal only with policy and administration.

With the coming into force of the National Health Service Act, the hospital services of the country were organised in Regional Groups, the Region under which the West Wilts Hospitals Management Committee work being the South Western Region. The Committee are responsible for the administration of a total of eleven hospitals, comprising six general hospitals, one maternity hospital (which is a Part II training school for midwives), one orthopaedic hospital, one infectious diseases hospital, one chronic sick hospital, and one chronic sick and mental defective hospital,

with a total bed complement of 195 acute medical and surgical beds, 44 maternity beds, 42 infectious diseases beds, 175 chronic sick beds, and 73 mental defective beds, making a grand total of 529 beds for the area, in which are included private ward and part-payment accommodation at Melksham, Trowbridge, Warminster, and Westbury. The hospitals serve an approximate population of 60,000.

At their first meeting, which was held on the 31st May, 1948, the Committee determined that, in order to preserve continuity and to keep local interest alive, the existing committees of the eleven hospitals should be invited to carry on, as sub-committees of the Committee itself. This invitation was readily accepted, and the position remains unaltered except at Bradford-on-Avon and Warminster. Here the sub-committees of the Bradford-on-Avon (Berryfield) Maternity Hospital, which was formerly adminstered by the Wiltshire County Council, and of the Beckford Orthopaedic Hospital, which was formerly administered by the Wiltshire and Dorset County Councils, have since agreed to be amalgamated respectively with those of the Bradford-on-Avon and Warminster district hospitals. In addition to the nine hospital sub-committees, the Committee have appointed the following five standing sub-committees ' Finance ; Building ; Medical ; Nursing ; and Farm and Garden. The Committee itself holds an ordinary meeting once a month, and special meetings as required. At the ordinary meetings, reports are received from the fourteen sub-committees, which also meet monthly.

The policy of the Committee has been to centralise the secretarial, financial, and supply organisations without interfering with the responsibility of local hospital sub-committees and matrons, and to make no change without the consent of the sub-committee concerned. Two sub-committees still retain their local organisation. Nor is any decision affecting a hospital taken until the question has been considered and reported upon by the sub-committee concerned. The headquarters organisation, which consists of a Secretary and a Finance Officer, with a staff of ten, is housed at the Isolation Hospital, Trowbridge. No Supplies Officer has been appointed, these duties being carried out by the joint staff of the Secretary and the Finance Officer. The Committee have adopted Standing Orders and Financial Regulations, which have since been used as a model by other Management Committees. Copies of these, and lists of the members of the various sub-committees, are available from the Secretary on request. They have also revised, and, where necessary, formulated staff establishments, the total staff establishment amounting to 393.

One of the first tasks undertaken by the Committee was to consider the whole question of the organisation of the area, the new buildings required, and the staff that would be necessary to deal with the proposed number of beds. For this purpose, they considered in early August, 1948, a memorandum on future developments, prepared by the Chairman of the Medical Sub-Committee, Dr. A. T. Schofield, and also one by Dr. R. W. Graham Campbell on the need for maternity services. Subsequently, Messrs. W. H. Watkins, F.R.I.B.A. & Partners, Chartered Architects, of Bristol, were consulted as to the development of the Trowbridge & District Hospital and projects for a new maternity unit, outpatients' department, and nurses' home at this Hospital, and for an outpatients' department at Bradford-on-Avon District Hospital were submitted to the Regional Hospital Board as long ago as August, 1948.

Further detailed proposals, which do not fall within the period of this report, have also been submitted, dealing with accommodation for nurses at Melksham and Beckford Orthopaedic Hospitals, and certain extensions. A comprehensive survey by Messrs. Watkins & Partners, who have now been appointed Architects to the Committee, has recently been adopted. This survey was actually completed after the expiry of the period under review, but it results from continuous discussion and consultation with the Committee and all sub-committees concerned. It shows that the existing 529 beds are insufficient, and that the total to be aimed at is 787. The maintenance of these beds would necessitate additional staff, bringing the total from 393 to approximately 520, and capital building programmes, of varying degrees of importance, at almost every hospital in the area. The Committee fully recognise that in present circumstances it is impossible to expect that these plans should be brought into full effect for some time, but the report is being transmitted to the Regional Hospital Board. It is the earnest hope of the Committee that not only their original recommendations but the whole comprehensive report will be approved, since it is the responsibility of the Regional Hospital Board to make available the necessary funds, after satisfying themselves as to the need, adequacy, and rate of future development of all proposals involving capital expenditure.

The staff position has given some anxiety. It is out of the question, in present circumstances, to obtain the full establishments provided for as ideal in the comprehensive plan, but it should not be impossible, provided that adequate accommodation is provided for the nursing staff, to staff the existing beds adequately. Certain staff changes have been made, but, in general, the Committee have been most fortunate in the services of the Matrons and staff in the various hospitals, whose devotion to duty and care for the comfort of the patients have been in full accordance with the great traditions of the nursing service.

At the Sambourne Infirmary, Warminster, and The Lodge, Semington, there is joint user with the Wiltshire County Council, and accommodation is provided, not only for the sick, but also for 95 non-sick persons. After considerable memoranda on the provision of accommodation for the chronic sick, consultations were held with the Wiltshire County Council, at the request of the Committee, concerning the future use of these two establishments, and a joint policy was adopted. It was agreed that to perpetuate the system of joint user would be a mistake, and it was resolved that, subject to the approval of the Ministry of Health, the number of sick patients at the Sambourne Infirmary should be progressively reduced, and the establishment ultimately revert to the County Council. The converse policy would apply at The Lodge, Semington, which would eventually become a hospital solely for mental defectives.

The Committee are strongly of opinion that the segregation of the chronic sick in separate hospitals would be a mistaken policy, and intend that chronic sick wards shall be provided at all the General Hospitals. No matter how carefully and efficiently establishments of this kind are administered, they undoubtedly suffer from the stigma of being institutions, and the Committee feel that the aged sick could be far more suitably cared for in special wings of their own District Hospitals, where they would regard themselves purely as patients and not as inmates, and be within easy

reach of their friends and relatives. The Committee's plan provides for special wards at the Trowbridge & District Hospital for the special treatment of such cases amongst the chronic sick as cannot be suitably dealt with at the proposed wards of the District Hospitals. A part-time Occupational Therapist is already employed at the Beckford Orthopaedic Hospital, Warminster, and consideration has been given to the development of this service at the chronic sick hospitals, where, no doubt, it will be greatly appreciated by the old persons.

Although arrangements for specialists' clinics are the responsibility of the Committee, the interim arrangements made by the Regional Hospital Board with the Wiltshire County Council still continue, and the Management Committee have so far been unable, in spite of representations, to assume their proper responsibilities in this sphere. The problem of providing suitable accommodation is now becoming increasingly urgent. Recommendations to improve and augment the present specialist clinics at Hospitals have been forwarded to the Regional Hospital Board at various times, and if implemented will fulfil an urgent need. For the convenience of the patients, an appointments system is being instituted at all of the Hospitals, and is greatly appreciated. When accommodation is available, it will, no doubt, be possible for the examination of school children by specialists to be carried out at the Outpatients' Department.

The review of medical apparatus and equipment is one of the responsibilities of the Medical Sub-Committee. They have carefully considered the needs of all the Hospitals from time to time, and some considerable improvement has already been achieved. Certain physiotherapy apparatus is now provided at all hospitals, sterilising equipment has been improved and supplemented, and many necessary surgical instruments provided.

One of the less publicised features of the Committee's work is the supply, repair, and renewal of medical and surgical appliances, applications for which vary from boots, belts, and trusses, to corsets and elastic hosiery. Applications for hearing aids, wigs, artificial limbs and eyes, spectacles, and mechanically-propelled invalid chairs are dealt with by the medical, nursing, and central office staffs. Although much of the expenditure is not charged to the Committee, the applications dealt with can be counted in thousands. It is gratifying to know that several mechanically-propelled invalid chairs have already been supplied to necessitous cases.

A statement of the available beds and average occupancy at the various hospitals for the first nine months, together with a table of outpatient attendances, is attached to this report. It will be seen that at the Sambourne Infirmary, Warminster, and The Lodge, Semington, where long-stay patients are accommodated, a high average occupancy was maintained. In the other Hospitals, the staff position has, in part, affected occupancy. An occupancy of over 70% should be easily achieved in all other Hospitals in normal conditions, and probably should have been achieved in the nine months under review in certain Hospitals.

Hospital costs have been affected considerably by the application of National Salaries and Wages Scales to nursing and domestic staffs respectively. Since the 5th July, 1948, there have also been increases in these scales.

Although this report must, for the reason given above, remain silent on the financial aspect, there is no reason why the Committee should not record their grateful appreciation of the magnificent work done by the Finance Sub-Committee. The amount of work involved in their voluntarily accepted duties may not be generally appreciated, and it is a great tribute to the Sub-Committee that the work has been so efficiently and punctually conducted.

The maintenance of buildings, plant, and grounds has also involved an immense amount of work. The leeway of the war years cannot be fully made up because of financial conditions, but the Building Sub-Committee and the Hon. Consulting Engineer have worked untiringly, visiting hospitals at frequent intervals, and the following achievements can be recorded—the complete external redecoration of the Sambourne Infirmary, and officers' residences ; internal and external redecorations at the Trowbridge & District Hospital ; part internal and external redecorations at The Lodge, Semington, and the building of a cool room ; adaptation and alteration of the Ante-Natal Clinic, and part internal and external redecoration at the Bradford-on-Avon Maternity Hospital ; part internal redecoration at the Bradford-on-Avon District Hospital ; and adaptations at the Trowbridge Isolation Hospital to accommodate the Central Office staff. The remaining Standing Sub-Committees and all the Hospital Sub-Committees have been unceasingly diligent in their efforts to maintain and improve the efficiency of the Hospitals and the comfort of the patients and staff. It is a great tribute to the voluntary spirit that the members of these bodies should be prepared, as before, to give up so much of their valuable time to the service of the sick and aged in the area.

In conclusion, the Committee wish to record their grateful appreciation of the invaluable work of their Secretary, Mr. J. E. Morgan, their Finance Officer, Mr. E. G. Smallwood, and their staff. Mr. Morgan himself has set an example of untiring energy and tactful co-operation, to which such success as the Committee have been able to achieve has been mainly due. His splendid work has been loyally seconded by the entire staff. The period under review has been one of great enthusiasm, hard work, and some frustration, but on the whole the Committee feel that the transition to the new system and subsequent developments give some cause for satisfaction. They have been busily engaged up to now in laying the foundations, and the efficiency and popularity of the ultimate structure must depend upon the wisdom and devotion with which they build and are encouraged to build. Their best encouragement would be the consciousness that they have the sympathy and support of those in whose service they are privileged to work.

HUBERT YOUNG,

Chairman

26th October, 1949

West Wilts Hospitals Management Committee

MEMBERS OF THE
WEST WILTS HOSPITALS MANAGEMENT COMMITTEE

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Vice-Chairman :

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Members :

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The Marchioness of Northampton, The Curatage, Horningsham, Warminster.

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A. Wellstead, Esq., 60, Newtown, Westbury.

STATISTICS FOR PERIOD 5.7.1948 TO 31.3.1949

HOSPITAL	STAFF (as at 31.3.1949)						PATIENTS							
	Nursing		Ad-min.	Trades men.	Domestic		Total Patient days	No. of Admis-sions	Average Daily occup-ancy	Operations		Out-Patients		Casualty Depart-ment Attend-ances
	Full-time	Part-time			Full-time	Part-time				Major	Minor	Patients	No. of Attend-ances	
Beckford Orthopaedic	9	—	—	—	8	3	4958	21	18	—	—	—	—	—
Bradford District	14	1	1	—	5	8	4538	276	17	—	44	274	397	765
Bradford Maternity	17	2	1	—	14*	7	5313	360	20	—	No record	No analysis made	1013	—
Melksham	14	—	2	1	8	5	7387	416	27	184	111	925	1205	3628
Prideaux	1	—	—	—	2	2	511	79	2	18	58	298	37	810
Sambourne	12	18	2	1	13	11	22347	62	83	—	—	—	—	—
Semington, The Lodge	10	15	2	—	6	4	41164	51	152	—	—	—	—	—
Trowbridge & District	14	13	2	—	9	6	7039	464	26	†76	26	583	751	330
Trowbridge Isolation	5	1	1	—	5	3	1061	64	4	—	—	—	—	—
Warminster	7	5	1	—	7	3	4228	329	16	57	224	222	222	1915
Westbury	6	7	1	—	5	4	4132	252	15	144	78	302	302	1335

*Includes 2 drivers. †Theatre closed during part of period.